

HAWAII STATE ETHICS COMMISSION

DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)

NAME (Last, First, Middle) Inouye, Lorraine Rodero	STATE POSITION HELD: (Dept/Div or Board/Commission) State Senator TERM OF OFFICE (Begin/End): 2002 / 2004
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FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN.
 USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
F	State of Hawaii State Capitol, Room 201 Honolulu, Hawaii 96813	D	State Senator
F	Aloha Blooms, Inc 215 Paukaa Drive Hilo, Hawaii 96720	C	Pres and CEO
SP	Floral Resources/Hawaii, Inc. 175 E Kawaiilani Street Hilo, Hawaii 96720	E	Pres and CEO

☐ Check here if entry is None

☐ Check here if additional sheets are attached

ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business incorporated, regulated, or licensed to carry on business in the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

F,SP,DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
SP	Hawaii Rainbows Business Development, LLC P O Box 391 Pepeekeo, Hawaii 96783	Real Estate Development	10%	\$50,000
F	Aloha Blooms, Inc 215 Paukaa Dr., Hilo, HI 96720	Tropical Flower Growing & Marketing	50%	500 sh.
SP	Aloha Blooms, Inc. 215 Paukaa Dr., Hilo, HI 96720	Tropical Flower Growing & Marketing	50%	500 sh.
SP	Floral Resources/Hawaii, Inc. 175 E Kawaiilani St Hilo, Hawaii 96720	Tropical Flower Growing & Export	50%	1,000 sh.
SP	Aina Hawaiian Tropical Products, LLC 175 E Kawaiilani St Hilo, HI 96720	Internet Marketing	20%	200 sh.
SP	Pahoa Exotic Flowers, LLC 175 E Kawaiilani St, Hilo, HI 96720	Tropical Flower	17.5%	175 sh.

☐ Check here if entry is None

☐ Check here if additional sheets are attached

ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD	DATE OF TRANSFER
	None	

☐ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 4: CREDITORS**

List the name and address of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding (excluding debts arising out of retail transactions or the purchase of consumer goods).

F,SP, DC,JT	NAME OF CREDITOR AND ADDRESS	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING
F & SP	First Hawaiian Bank (Hilo Residence) 1205 Kilauea Avenue Hilo, Hawaii 96720	G	
F & SP	First Hawaiian Bank (HNL Condo)	E	
F & SP	First Hawaiian Bank (Volcano home)	E	

☐ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS**

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
F & SP	Aloha Blooms, Inc. 215 Paukaa dR., Hilo, HI 96720	Directors	Annual	None
F & SP	Trust of Ronald K. Jitchaku c/o 215 Paukaa Dr, Hilo, HI 96720	Trustees	Ongoing	None
SP	Floral Resources/Hawaii, Inc. 175 E Kawaiilani St Hilo, Hawaii 96720	Director	Annual	None
SP	Aina Hawaiian Tropicals, LLC 175 E Kawaiilani Street Hilo, Hawaii 96720	Director	Annual	None
SP	Pahoa Exotic Flowers, LLC 175 E Kawaiilani Street Hilo, Hawaii 96720	Director	Annual	None

☐ Check here if entry is None☒ Check here if additional sheets are attached

Reference to Item 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

F, SP, DC, JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
F	Catholic Charities Hawaii 250 Vineyard Street Honolulu, Hawaii 96813	Directors	Annual	None

ITEM 6: INTERESTS IN REAL PROPERTY HELD IN THE STATE

List interests in real property in the State, held during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER	VALUE
F & SP	3161 Ala Ilima St, #2210 Honolulu, Hawaii 96818	1-1-1-060-011/CPR 0329	G
F & SP	215 Paukaa Drive Hilo, Hawaii 96720	(3) 2-7-016-009	H
F & SP	Old Golf Links Road Volcano, Hawaii 96785	(3) 9-9-02-12	F
F	Keaau Ag Lots Subdivision (50% Interest) Keaau, Hawaii 96749	(3) 1-7-027:173	G

☐ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED**

List interests in real property in the State, acquired during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION
F & SP	3161 Ala Ilima Street, #2210 Honolulu, Hawaii 96818 TMK: 1-1-1-060-011/CPR 0329	G	Ronald & Pearl Yamanouchi 83 Hoomalu Street Pearl City, HI 96782

☐ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED**

List interests in real property in the State, transferred during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION
	None		

☐ Check here if entry is None☐ Check here if additional sheets are attached

ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT	NAME OF STATE AGENCY
None	

☐ Check here if entry is None ☐ Check here if additional sheets are attached

ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F,SP,DC,JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
	None			

☐ Check here if entry is None ☐ Check here if additional sheets are attached

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STATE OF HAWAII
ETHICS COMMISSION

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

SIGNATURE *Maia R. Young* DATE 3-5-04